## PART B - FEE(S) TRANSMITTAL

end this Torm, together. JUN 0 2 2008

n applicable fee(s), to: Mail Mail Stop ISST FEE
Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS Phis forth should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where ap in m

appropriate. All further indicated unless correct maintenance fee notifica	ed below or directed off	ng the Patent, advance of nerwise in Block 1, by (	orders and notification (a) specifying a new c	of mainte correspond	enance fees w ence address;	ill be m and/or (	ailed to the current (b) indicating a sepa	correspondence address as trate "FEE ADDRESS" for	
CURRENT CORRESPOND	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.								
513	7590 04/09	/2008		inave its c			•	, mission	
WENDEROTI 2033 K STREE SUITE 800	IS AUTHORIZED	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.							
WASHINGTON	N, DC 20006-1021 -	THE COMMO	IO DEPOSIT					(Depositor's name)	
2033 K STREET N. W. SUITE 800 WASHINGTON, DC 20006-1021 THE COMMISSIONE TO CHAFIG! FEES FOR ACCOUNT NO 23-0			75						
		ACCOUNT		(Date)					
APPLICATION NO. FILING DATE		. FIRST NAMED INVE		NTOR ATTORNEY DOCK			NEY DOCKET NO.	KET NO. CONFIRMATION NO.	
10/773,277	10/773,277 02/09/2004		Hisayuki Kuwaha	ra	2004-0197A			8576	
TITLE OF INVENTION	I: <del>EPOXY RESIN CURI</del>	NO AGENT OF ALIPH			DITIONPRO	DUCT	=-::		
1	Low-tem	peratur	-E cura	PIE	Ebox	4	resin	•	
	curing	agent a	ind epox	YNE	isin c	om	positio	<u> </u>	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE I	DUE PRE	EV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300		\$0 #5/83/29	ria aun	\$1740 NDAF2 00020109 J	07/09/2008	
EXAM	EXAMINER		CLASS-SUBCLASS	s #1 FC:1				1440.00 OP	
SELLERS,	ROBERT E	1796	528-121000		85 FC:15			300.00 OP	
1. Change of correspond CFR 1.363).  Change of corresp Address form PTO/S  "Fee Address" inc PTO/SB/47; Rev 03- Number is required	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.								
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print	or type)					
recordation as set for (A) NAME OF ASSI	th in 37 CFR 3.11. Com	pletion of this form is NC	e data will appear on to to a substitute for filin  (B) RESIDENCE: (G)  TOYKO,	g an assig CITY and	nment.			ocument has been filed for	
Please check the appropr	riate assignee category or	categories (will not be p	printed on the patent):	☐ Indi	vidual 🔕 Co	rporatio	n or other private gro	oup entity Government	
4a. The following fee(s) are submitted:  Sign Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			4b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed. Check No. 2  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this for						
_ ~ .	itus (from status indicate	•					•		
	ns SMALL ENTITY state		b. Applicant is no	_	•			,	
NOTE: The Issue Fee a interest as shown by the	records of the United Sta	uired) will not be accepted	k Office.	han the ap	plicant; a regis	stered at	tomey or agent; or the	ne assignee or other party in	
Authorized Signature	Mary	hew Jaco		:	Date J	une 2	2, 2008		
Typed or printed nam	36 1	M. Jacob		Registration No. 25,154					
an application. Confider	itiality is governed by 35	U.S.C. 122 and 37 CFR	1.14. This collection	is estimate	ed to take 12 n	ninutes t	o complete, includir	d by the USPTO to process) ag gathering, preparing, and me you require to complete	

Than submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together % JUN 0 2 2008

i applicable fee(s), to: Mail Mail Stop ISSU\_ FEE
Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be completed where appropriate. All further correspondence meliating the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for monitoring the patent, advance or present fee address; and/or (b) indicating a separate "FEE ADDRESS" for monitoring fee address; and/or (b) indicating a separate "FEE ADDRESS" for monitoring fee address; and/or (b) indicating a separate "FEE ADDRESS" for monitoring fee address; and/or (c) indicating a separate "FEE ADDRESS" for monitoring fee address; and/or (b) indicating a separate "FEE ADDRESS" for monitoring fee address; and/or (b) indicating a separate "FEE ADDRESS" for monitoring fee address; and/or (c) indicating a separate "FEE ADDRESS" for monitoring fee address; and/or (b) indicating a separate "FEE ADDRESS" for monitoring fee address; and/or (c) indicating a separate "FEE ADDRESS" for monitoring fee address; and/or (c) indicating a separate "FEE ADDRESS" for monitoring fee address; and/or (d) indicating a separate "FEE ADDRESS" for monitoring fee address; and/or (d) indicating a separate "FEE ADDRESS" for monitoring fee address; and/or (d) indicating a separate "FEE ADDRESS" for monitoring fee address; and/or (d) indicating a separate "FEE ADDRESS" for monitoring fee address; and/or (d) indicating a separate "FEE ADDRESS" for monitoring fee address; and/or (d) indicating a separate "FEE ADDRESS" for monitoring fee address; and/or (d) indicating a separate "FEE ADDRESS" fee address fee addres

maintenance fee notifica	tions.								
CURRENT CORRESPOND	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.								
513	7590 04/09	9/2008				4:6:4-	- CM-H		
WENDEROTE	I, LIND & PONA	CK. L.L.P.		Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope					
	rn w	•	-1750	States	Postal Service w	ith suff	icient postage for firs	st class mail in an en	nvelope
CLUTE OOO	IS AUTHORIZED	addre	ssed to the Mail	Stop	SSUE FEE address	above, or being fa	csimile		
SUITE 800		- CAMISSIONEH	A IS AUTHORIZED  MALENCY IN THE  MALENCY IN THE  MALENCY IN THE	addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
WASHINGTON	I, DC 20006-1021 <i>-</i>	THE CONTO		(Depositor's name)					
		TO CHAPAGE							
		FEES FOR ACCOUNT NO 23-09	75	1				(S	ignature)
		ACCOUNT NO					<del></del>		(Date)
		•							(154.0)
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	√TOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
	TIENOBATE						didi bookbi iio.		
10/773,277	77 02/09/2004		Hisayuki Kuwahara				2004-0197A	8576	
	PPOVV DECDLOUR	NO AGENT OF ALIPHA	TIC DIAMINE/CTY	RENE ADDITION PRODUCT					
·							resin		
1		peratur	-e curp	1010	E Ebox	·3	1 00111		
ŧ	curing	AGENT A	nd Epox	NY	resin (	DW	rpositio	20	
				<del>'</del> +				<del></del>	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE I	DUE   I	PREV. PAID ISSUI	FEE	TOTAL FEE(S) DUE	DATE DUE	.
nonprovisional	NO	\$1440	\$300		\$0		\$1740	07/09/2008	
	110	<b>31440</b>	\$500		φU		31740	07/09/2000	,
EXAM	INER	ART UNIT	CLASS-SUBCLASS	s					
		Aut Ont	L_CENSS-SOBCEROS						
SELLERS,	ROBERT E	1796	528-121000						
Cl		CHE . A 11 . # (27	1 2 5				<del> </del>		
CFR 1.363).	ence address or indicatio	n of "ree Address" (37	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys  Wenderoth, Lind & Panack, L. P.						
_ ′	andanaa addaaa (aa Cha	of Common do							
Address form PTO/SI	ondence address (or Cha 3/122) attached	inge of Correspondence	or agents OR, alte			_	2		
	•	u ta dia ata a ca	(2) the name of a	single	firm (having as a	membe	era <sup>Z</sup>		
PTO/SB/47: Rev 03-0	ication (or "Fee Address 2 or more recent) attach	indication form	registered attorney	y ot ag	ent) and the name	es or up			
Number is required.	2 of more recently attack	ica. Osc of a Customer	2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
			<u> </u>				·		
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON T	THE PATENT (print of	or type	•)				
PLEASE NOTE: Unl	ess an assignee is ident	ified below, no assignee pletion of this form is NO	data will appear on t	the pate	ent. If an assigne	ee is id	entified below, the de	ocument has been fi	iled for
recordation as set fort	h in 37 CFR 3.11. Com	pletion of this form is NO	T a substitute for filin	ig an as	ssignment.				
(A) NAME OF ASSIG	(CITY and STATE OR COUNTRY)								
MITSUBISHI G	TOYKO,	•							
MITSODISHI G	AS CHEMICAL C	OFFANI, INC.	TOTKO,	JAFA	TÍN '				
·									
lease check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	O I	ndividual 🔕 Co	rporatio	on or other private gro	oup entity Gove	rnment
			· · · · · · · · · · · · · · · · · · ·			•	, , , , , , , , , , , , , , , , , , ,		
a. The following fee(s):	are submitted:	41	o. Payment of Fee(s):	(Please	e first reapply an	v previ	ously paid issue fee	shown shove)	
Issue Fee			A check is enclose	cod C	heck No	Q(	177	silowii above,	
Dublication For O	la a1114 41	· · · · · · · · · · · · · · · · · · ·	A check is chicles	scu. C	F PTO 2020	_0	3121	<del></del>	
Publication ree (N	o small entity discount	Payment by credit card. Form PTO-2038 is attached.							
Advance Order -	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).								
	- <del></del>		overpayment, to	Deposi	Account Number	r	(enclose a	n extra copy of this I	iorm).
6. Change in Entity Sta	tus (from status indicated	d above)							
a. Applicant claim	s SMALL ENTITY state	us. See 37 CFR 1.27.	b. Applicant is no	o longe	er claiming SMAI	L ENT	ITY status. See 37 CI	FR 1.27(g)(2).	
NOTE: The Issue Fe' Am	d Publication Fee (if rec	uired) will not be accented		-	-				<del></del>
nterest as shown by the	ecords of the United Sta	uired) will not be accepted tes Patent and Trademark	Office.	man uic	applicant, a regi	sici cu a	uorney or agent, or th	ie assignee or other j	party in
		-						<del></del>	
Authorized Cianoture	Muse	of a Straft			ъ., Т		2 2008		
Authorized Signature		hew gent			Date J	une	2, 2008		
Timed or printed no	Matthew	M. Jacob	•		Registration N	. 25	. 154		
Typed or printed name		04000	<del> </del>		Registration N	o. <u>23</u>	, . J T		
This collection of inform	ation is required by 37 C	FR 1.311. The information	on is required to obtain	n or ref	tain a benefit by the	ne publi	c which is to file (and	hy the USPTO to a	rocess)
n application. Confiden	iality is governed by 35	U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the NOT SEND FEES OR (	1.14. This collection	is estin	nated to take 12 n	ninutes	to complete, includin	g gathering, prepari	ng, and
ubmitting the completed	application form to the	USPTO. Time will vary	depending upon the	individ	iual case. Any co	mments	on the amount of tir	ne you require to co	mplete
no 101111 and/or suggesti Box 1450, Alexandria V	irginia 22313-1450. DC	NOT SEND FEES OR (	E CHIEL INFORMATION (	Juicer,	, U.S. Patent and This address	I radem   SENT	ark Ullice, U.S. Depart	for Patents P.O. Pa	e, P.O.
Alexandria, Virginia 223	13-1450						. J. John Hissionel	ioi i awiis, r.o. Do.	A 1730,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.